

Enclosure B

County Response Cover Page

San Francisco County is requesting participation in the Enhanced Anti-Fraud Program.

Board of Supervisor Approval

Approved on November 10, 2009, by the San Francisco Board of Supervisors

Name of Approver: San Francisco Board of Supervisors and Mayor Gavin Newsom

Signature: See attached certified copy of Board Resolution signed by Angela Calvillo, SF Clerk of the Board

Name of County District Attorney Representative: Eugene G. Clendinen, Chief Financial Officer

County District Attorney Representative Telephone #: 415-553-1895

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County Welfare Department Representatives Telephone #: 415-503-4801

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Enclosure C

LIST OF REQUIRED COUNTY PLAN COMPONENTS

IHSS Overpayments/Underpayments

County social workers and case aides have met periodically with both Quality Assurance workers and with IHSS investigators at the HSA Special Investigations Unit to discuss and review strategies for identifying payment discrepancies. Over the last three years, IHSS social workers, payment unit staff, case aides have developed a successful track record using referral forms to make requests for the Overpayment Unit, which is housed with the Special Investigation Unit, to calculate potential budget discrepancies. The Overpayment Unit has an existing process for calculating overpayments and underpayments for IHSS. The current OP technician who calculates these referrals has a background in IHSS eligibility, and is therefore familiar with IHSS regulations, program processes, and IHSS-specific budgeting. Calculations are made using budgeting spreadsheets and programs developed by the HSA's IT Division for this purpose. Overpayments are tracked and collected by the HSA's in-house Collection Unit.

For FY 2009/10, over and underpayment calculations will be made by a dedicated program specialist.

Please find the detail on overpayments and underpayments identified by County Quality Assurance (QA) activities from 2004 to the present in Enclosure D.

Fraud Referrals/Outcomes

Fraud referrals from the IHSS staff are initially reviewed by the IHSS QA Supervisor and then forwarded to the Sr. Investigator at the HSA Special Investigations Unit (SIU). The Sr. Investigator reviews the referrals to determine whether they should be assigned to one of the SIU's dedicated IHSS assistant investigators, or referred to a different agency or jurisdiction. If there is a link to abuse or neglect of an elder, the case will be referred to Adult Protective Services and possibly to the San Francisco District Attorney's Forensic Center for investigation. If the case is complex and involves multiple jurisdictions, it will be referred to the Department of Health Care Services (DHCS) for joint-jurisdictional investigation. The HSA has a strong working relationship with investigators at DHCS and cases will be investigated and referred in a cooperative manner. The HSA Sr. Investigator will then assign remaining cases to investigators at the SIU.

Please see Enclosure D for the breakdown of fraud referrals since FY 2004/05 and their outcomes.

Collaboration and Partnerships with District Attorney's Office (DAO)

IHSS Fraud Detection/Prevention/Referral activities in FY 2009-10

San Francisco HSA has been actively conducting fraud detection and prevention activities since 2003, even prior to the 2004 QA legislation. SF HSA started in 2003 with a dedicated IHSS assistant investigator and added a second assistant investigator with the State QA funds in 2004. The assistant investigators are regularly paired with welfare fraud investigators to conduct investigations. In addition, a QA supervisor works with IHSS social workers, case aides, and payment staff to review, identify, and refer suspected fraud cases. In recent years, formal fraud prevention and identification training has been conducted for all IHSS staff, and periodic meetings between social workers and investigators have been held. In addition, regular coordination meetings have been conducted between the QA Supervisor and the SIU staff.

Currently, the process for referrals is as follows:

- A. Referrals are reviewed and formally accepted, referred on to another investigative body, or rejected.
- B. For those accepted for investigation, case documents are gathered and analyzed.
- C. Home visits are conducted on 98% of the referrals
- D. Interviews of providers, recipients, and witnesses are made and written into formal reports.
- E. As indicated, investigators monitor IPs' actual work schedules
- F. Case Reports are formal and include clear allegations, analysis, findings and rationales.
- G. Overpayment calculations are prioritized and calculated by one identified OP worker trained with a background in IHSS eligibility.
- H. Final case reports are reviewed by the SIU senior investigator who makes decisions as to the appropriateness for prosecution referrals.

The Special Investigations Unit (SIU) of the HSA has been working closely with San Francisco District Attorney Office on the prosecution of key IHSS fraud cases. During the last six months, the District Attorney has accepted three completed investigations from the SIU, for criminal prosecution. Included are the following cases:

- A recipient caused fraud by means of identify theft: \$21,000 fraud
- A recipient and provider caused fraud in which services billed were not provided: \$33,000
- A recipient and provider caused fraud in which services billed were not provided: \$16,000

Collaboration and Partnerships with the California Department of Health Care Services (DHCS) and the California Department of Social Services (CDSS)

The HSA has a strong working relationship with investigators at DHCS and cases will be investigated and referred in a cooperative and collaborative manner. The number of cases referred to the DHCS in past years has been low due to the lack of staffing at DHCS. However, this number is not reflective of the history of positive meetings, discussions, and case conferences between our organizations.

The HSA SIU has been active in working with the CDSS Fraud Bureau on any number of anti-fraud and program integrity initiatives in recent years.

The HSA SIU investigators will meet with DHCS and CDSS staff to work out how we will process referrals. Case conferences will be conducted on joint investigations very early on so that the division of labor is clear and the method for timely communication of new information is established. Referrals to DHCS will be tracked by the San Francisco County IHSS Fraud Unit Analyst who will be responsible for HSA's reports to CDSS. Case outcome summary sheets will be sent with each case referred so that our partners can easily report back required information to us. However, follow up tracking by phone will be made on those summary sheets that are not returned. In addition, the Analyst will maintain an in-house monthly case tracking report showing the open case detail of referred cases.

Mechanism for Tracking/Reporting

San Francisco Human Service Agency is committed to tracking and reporting outcomes of its IHSS investigation efforts to CDSS. Final data for the fiscal year will be submitted as required by August 1, 2010. Current tracking of the local efforts is made through a computer program developed by the HSA's IT Division. The IT Division will work with the Special Investigations Unit to assure that information is processed in such a way as to provide required tracking and reports.

San Francisco County's Current and Proposed Anti-Fraud Activities

HSA currently has two dedicated assistant investigators who respond to fraud referrals from the IHSS QA supervisor. Strict referral guidelines have been provided to the IHSS program so as not to overwhelm the investigative staff. Referrals are reviewed by the SIU Supervisor and assigned to the IHSS assistant investigators. During the course of their investigations, case payment records and physical case records are reviewed. Assistant investigators collect and preserve evidence. Home visits and related interviews are scheduled and conducted in 98% of the accepted IHSS investigations. The HSA SIU received 143 investigation referrals during the 2008/09 fiscal year and only rejected seven of them. However, it is expected that once referral criteria is loosened, IHSS staff will increase referral numbers substantially.

IHSS Investigators follow up on the SSA "death match" and on cases where recipients are out of the country or in the hospital for extended periods. If indicated, they monitor IPs' actual work schedules in order to assure that services are in fact being provided. In cases where there is a concern for fraudulent documents, signature comparisons are made by investigators who have completed a POST approved handwriting analysis course. Bank documents may be obtained.

The HSA - IHSS Investigators have a several years-long working relationship with IHSS social workers and support staff. Periodic meetings have been held between investigators and social workers to discuss fraud indicators and appropriate fraud referrals. The positive working relationship between investigators and program staff is evidenced by the increase in fraud referrals over the last few years. See Enclosure D for fraud referrals and outcomes.

In line with the core investigation activities already in place, HSA's SIU intends to continue its focus on home visits and in-home interviews for the 2009/10 fiscal year. In addition, investigators will also focus on time sheet irregularities including issues surrounding fingerprint anomalies. Investigators will also follow up on negative or inconclusive outcomes on criminal background checks.

San Francisco County proposes to add the following staff and support to our current investigation efforts to conduct fraud detection and prevention activities:

- 1 - Investigative Unit Supervisor (a Peace Officer under 835.35 PC)
Supervises the day-to-day responsibilities of the IHSS fraud unit. Reviews referrals and determines whether to refer out or to assign to unit staff. Responsible for the quality of casework, and for training, mentoring and evaluating subordinate staff. Carries a small fraud caseload.
- 3 - Investigators (Peace Officers under 835.35 PC)
Investigate IHSS fraud caseload. Collect and preserve evidence. Conduct home visits and interview recipients, providers, and witnesses. Write reports and make database entries.
- 1 - Analyst
Assures the proper data collection is implemented, analyzed and accurately reported. Assures that the State receives the required reports and data.
- 1 - Clerk typist
Organizes the background check returns from the Department of Justice and provides general clerical support to the unit.
- 1- Overpayment Specialist
The dedicated Overpayment Specialist will calculate IHSS overpayments.

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- 1- Information Systems Business Analyst
Responsible for business process planning, program development, program maintenance, ad hoc report development, and testing.
- 1 – Information Systems Programmer
Completes system modifications to collect data for reporting purposes and prepares annual report.
- \$50,000 work order with the San Francisco District Attorney's Office to support efforts in identifying elder abuse and neglect cases among the IHSS population.

San Francisco County Proposed Budget for Utilization of Funds

Description	Full Sal & Ben	FY 0910 FTE	FY 0910 Budget (Effect. Jan. 1)	FY 1011 FTE	Annualized Cost
Grant-funded Items					
Investigations Staff					
Investigations Supervisor	128,875	1.0	64,438	1.0	128,875
Welfare Fraud Investigator	118,611	3.0	177,917	3.0	355,834
Analyst	130,526	1.0	65,263	1.0	130,526
Clerk Typist	73,529	1.0	36,764	1.0	73,529
Overpayment Specialist	101,659	1.0	50,829	1.0	101,659
IS Business Analyst	143,156	1.0	71,578	1.0	143,156
IS Programmer	129,887	1.0	64,944	1.0	129,887
Workorder Services					
District Attorney workorder			50,000		100,000
Operational Expenses					
Employee start-up costs			45,000		-
Office build out			20,000		-
Materials & Supplies			6,300		12,600
Rent			27,000		54,000
Total Grant Funded Items		9.0	680,033	9.0	1,230,067
Locally Funded Items (GF Match)					
Deputy Director, Aging & Adult Services	185,109	0.10	9,255	0.10	18,511
IHSS Program Manager	185,109	0.10	9,255	0.10	18,511
Adult Protective Services Program Mgr	159,906	0.15	11,993	0.15	23,986
Budget Analyst	130,526	0.15	9,789	0.15	19,579
Investigations Manager	185,109	0.25	23,139	0.25	46,277
Supervising Welfare Fraud Investigator	128,875	0.25	16,109	0.25	32,219
Welfare Fraud Investigator / Peace Officer	118,611	0.75	44,479	0.75	88,959
Program Specialist Supervisor	117,667	0.10	5,883	0.10	11,767
Overpayment Specialist	101,659	0.50	25,415	0.50	50,829
Total Locally-Funded Items		2.35	155,319	2.35	310,637
Local Contribution %			19%		20%
Total Proposal Costs			835,352		1,540,704

Description of how San Francisco County Will Integrate Other Program Integrity Efforts within the Plan

The IHSS anti-fraud program will be housed within the Human Services Agency Investigations Division which oversees the program integrity activities for San Francisco's public assistance programs. The IHSS program itself is situated under the Department of Adult and Aging Services, and is in a different physical location. Thus,

the Investigations Division acts independently from the IHSS program. The Investigations Division includes the Special Investigations Unit, an early (welfare) fraud intervention unit, Overpayments Unit, Collections Unit, Quality Control, and Appeals. In this collegial climate, investigators share techniques and training, and are able to develop their expertise in detecting and investigating fraud.

In addition to conducting fraud investigations in IHSS, the IHSS Fraud Unit will support the program integrity efforts of IHSS program staff. For instance, County staff is currently working out the processes for fingerprinting providers and recipients. The IHSS Fraud Unit will support the program's efforts to create a structure for the timely fingerprinting of the providers and recipients, and in addition, receive and manage the outcomes from the background checks. The IHSS program staff is currently working on the provider orientation presentations. The IHSS Fraud Unit will be available to emphasize to the providers the need for accurate information in time sheets. IHSS Fraud Unit staff will be available to assist with other program integrity-related initiatives as needed.

Annual Outcomes Report

The San Francisco Human Services Agency is committed to accurate and timely reporting of the annual outcomes of the County's efforts to prevent, detect, investigate and prosecute IHSS fraud.

Enclosure D

County: **San Francisco**

Overpayments identified by County QA		04-05	05-06	06-07	07-08	08-09
Breakdown of Causes	Total Amount per Fiscal Year:	17,011	199,948	138,040	107,241	211,298
	Number of instances	13	24	69	43	124
	Provider:	12	22	57	36	119
	Recipient:	0	1	3	5	4
	County Error:	0	0	0	0	0
	Unknown:	0	0	0	0	0
	Other:	1	1	9	2	1

Underpayments identified by County QA		04-05	05-06	06-07	07-09	08-09
Breakdown of Causes	Total Amount per Fiscal Year:					
	Number of instances:					
	Provider:					
	Recipient:					
	County Error:					
	Unknown:					
	Other:					

Fraud Referrals/Outcomes		04-05	05-06	06-07	07-08	08-09	7-1-09 to 9-30-09
Individuals Responsible	Number of referrals to HSA Investigations:	69	126	104	105	143	24
	Number of referrals to DHCS:	2	2	0	0	0	0
	Number handled locally by DA:	1	11	1	5	3	1
	Number of convictions:	0	0	0	0	0	0
	Court Ordered Restitution:	0	0	0	0	0	0
	Amount of funds involved in the convictions:	0	0	0	0	0	0
	Amount of funds recovered:	825	900	62,590	52,324	93,293	21,088
	Amount of funds pending recovery:	16,186	99,048	75,450	54,917	118,005	21,881
	Basis for the Conviction:						
	Recipient:	11	21	23	16	26	3
	Provider:	56	96	73	78	113	15

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County Staff:	0	0	0	0	0	0
Other:	2	12	8	11	28	6
Unknown:	0	0	0	0	0	0

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Utilization of County DA for Fraud		04-05	05-06	06-07	07-09	08-09	7-1-09 to 9-30-09
Documented referrals to HSA							
Outcomes	Accepted:	67	118	96	96	136	20
	Rejected:	2	11	8	9	7	4
	Pending:	0	0	0	2	35	14
	Completed Investigation						
	No Fraud:	42	76	50	52	54	3
	Restitution Action:	24	31	45	37	45	2
	Referred for Prosecution	1	11	1	5	2	1
	Criminal Charges Filed:	0	1	0	0	0	
	No Charged Filed:						
	Convictions:	0	1	0	0	0	
Outcomes	Acquittals:	0	0	0	0	0	
	Dismissals:	0	0	0	0	0	
	Pending Investigation:	0	0	0	2	35	14
	Restitution						
	Court Ordered:						
	Restitution Action:	24	31	45	37	45	2
	Fines						
	Prosecutions Completed	0	1	0	0	0	
	Convictions	0	1	0	0	0	0
	Misdemeanor Felony		1				

Budget Justification

City & County of San Francisco's Fraud Funding Plan for FY 2009-10

Budget Section	Total
A. Personnel Costs (includes employee benefits)	\$ 638,218
B. Operating Expenses	\$ 104,218.50
C. Equipment Expenses	\$ 16,315.50
D. Travel/Per Diem and Training	\$ 26,600
E. Subcontracts and Consultants	\$
F. Other Costs	\$ 50,000
G. Indirect Expenses	\$
Total Expenses	\$ 835,352

A. Personnel Costs (including employee benefits)	Total Budget
Title: Investigations Supervisor Salary Calculation: \$92,716 annual salary x 1.39 Fringe Benefits x 1 FTE x 0.5 half year Duties Description: Supervises the day-to-day responsibilities of the IHSS fraud unit. Reviews referrals and determines whether to refer out or to assign to unit staff. Responsible for the quality of casework, and for training, mentoring and evaluating subordinate staff. Carries a small fraud caseload.	\$ 64,438
Title: Welfare Fraud Investigator Salary Calculation: \$85,332 annual salary x 1.39 Fringe Benefits x 3 FTEs x 0.5 half year Duties Description: Investigate IHSS fraud caseload. Collect and preserve evidence. Conduct home visits and interview recipients, providers, and witnesses. Write reports and make database entries.	\$ 177,917
Title: Social Worker Salary Calculation: \$59,325 annual salary x 1.39 Fringe Benefits x 1 FTE x 0.5 half year Duties Description: Provide enhanced support to client victims to ensure they are connected to reputable service providers and receiving services to safely reside at home. This position would also counsel clients to empower them against falling victim to a repeat of this fraud.	\$ 41,231
Title: Senior Administrative Analyst Salary Calculation: \$93,904 annual salary x 1.39 Fringe Benefits x 1 FTE x 0.5 half year Duties Description: Assures the proper data collection is implemented, analyzed and accurately reported. Assures that the State receives the required reports and data.	\$ 65,263
Title: Clerk Typist Salary Calculation: \$52,899 annual salary x 1.39 Fringe Benefits x 1 FTE x 0.5 half year Duties Description: Provides general clerical support to the unit. Assists the investigators in retrieving IHSS time sheet and case records.	\$ 36,764
Title: Overpayment Specialist	\$ 50,829

Salary Calculation: \$73,136 annual salary x 1.39 Fringe Benefits x 1FTE x 0.5 half year Duties Description: Analyzes systems data and calculates IHSS overpayments.	
Title: IS Business Analyst Salary Calculation: \$102,990 annual salary x 1.39 Fringe Benefits x 1FTE x 0.5 half year Duties Description: Responsible for business process planning, program development, program maintenance, ad hoc report development, and testing.	\$ 71,578
Title: IS Programmer Salary Calculation: \$93,444 annual salary x 1.39 Fringe Benefits x 1FTE x 0.5 half year Duties Description: Completes system modifications to collect data for reporting purposes and prepares annual report.	\$ 64,944
Title: Investigator Overtime Salary Calculation: 8hrs / week x 52 weeks /yr x 5 FTEs (2 existing & 3 included in this proposal) * 1.5 time and half x 0.5 half year x \$41.83 investigator hrly wage. Duties Description: Overtime for weekend and evenings.	\$ 65,254
Total Personnel Costs:	\$ 638,218

B. Operating Expenses	Total Budget
Title: Employee start-up costs Description: One-time purchase and set-up of computers, cubicles, and telephones. One-time purchase of weapons and protective vests.	\$ 28,685
Title: Office build out Description: One-time cost of reconfiguring space to accommodate additional staff and building private interview space.	\$ 42,234
Title: Materials & Supplies Description: Ongoing costs of miscellaneous office supplies and materials for the daily operation of this program.	\$ 6,300
Title: Rent Description: Ongoing cost of the office space needed for the additional staff funded by this allocation.	\$ 27,000
Total Operating Expenses:	\$ 104,218.50

C. Equipment Expenses	Total Budget
Title: Equipment purchases Description: Cameras and laptops for field work	\$ 16,315.50

Total Equipment Expenses:	\$ 16,315.50
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D. Travel/Per Diem and Training	Total Budget
Title: Travel	\$ 26,600
Description: Mileage & car rental costs	
Total Travel/Per Diem and Training:	\$ 26,600

E. Subcontracts and Consultants	Total Budget
Title:	\$
Description:	
Total Subcontracts and Consultants:	\$ 0

F. Other Costs	Total Budget
Title: District Attorney's Office Support	\$ 50,000
Description: Work order with the San Francisco District Attorney's Office to support efforts in identifying elder abuse and neglect cases among the IHSS population.	
Total Other Costs:	\$ 50,000

G. Indirect Expenses	Total Budget
Title:	\$
Description:	
Total Indirect Costs:	\$